

091849681

Application or Docket Number

00-653

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | 14 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 14 minus 20= | |
| INDEPENDENT CLAIMS | | minus 3 = |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

• If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

| RATE | FEES | RATE | FEES |
|-----------|--------|------|------------------|
| BASIC FEE | 355.00 | OR | BASIC FEE 710.00 |
| X\$ 9- | | OR | X\$18- |
| X40- | | OR | X80- |
| +135- | | OR | +270- |
| TOTAL | | OR | TOTAL 710 |

CLAIMS AS AMENDED - PART II

(Column 1) 1-21-05 (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESNT EXTRA |
|--|---|-------|---|--------------------------|
| | Total | 14 | Minus | 20 |
| Independent | 1 | Minus | 3 | - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|------|------------------------|
| X\$ 9- | | OR | X\$18- |
| X40- | | OR | X80- |
| +135- | | OR | +270- |
| TOTAL ADDT. FEE | | OR | TOTAL ADDT. FEE |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESNT EXTRA |
|--|---|-------|---|--------------------------|
| | Total | 14 | Minus | 20 |
| Independent | 1 | Minus | 3 | - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|------|------------------------|
| X\$ 9- | | OR | X\$18- |
| X40- | | OR | X80- |
| +135- | | OR | +270- |
| TOTAL ADDT. FEE | | OR | TOTAL ADDT. FEE |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESNT EXTRA |
|--|---|-------|---|--------------------------|
| | Total | 14 | Minus | 20 |
| Independent | 1 | Minus | 3 | - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|------|------------------------|
| X\$ 9- | | OR | X\$18- |
| X40- | | OR | X80- |
| +135- | | OR | +270- |
| TOTAL ADDT. FEE | | OR | TOTAL ADDT. FEE |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or by dependent) is the highest number found in the appropriate box in column 1.

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